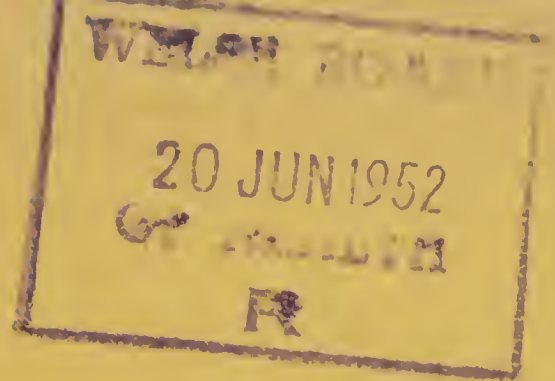


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**LLANFYLLIN
RURAL DISTRICT COUNCIL.**

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

YEAR 1950.



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CARTREF,

LLANFAIR CAEREINION,

WELSHPOOL.

4/12/1951

*To the Chairman and Members of the Llanfyllin Rural
District Council.*

Ladies and Gentlemen,

I have the honour of submitting to you my Annual Report dealing with the Vital Statistics, and Sanitary Circumstances of the area for the year 1950.

The active immunization of children against Diphtheria has now been carried out for a period of years and its success is reflected in the continued absence of this disease.

It cannot be too often and strenuously urged that, to maintain this very satisfactory state, there should be no "slackening off" in the protection, by this method, of infants when they arrive at the age of some 10 months.

In districts of this nature it is, of course, very difficult for mothers to attend with their babies at Immunization Centres more especially when arrangements have to be made for the supervision and feeding of other members including children during their absence. The effort however is well worth while.

The erection of houses proceeds though, for a variety of reasons, somewhat tardily. In the meanwhile the urgent need for houses still persists.

This applies with equal force to the problems of the extension of water supplies and sewerage and sewage disposal schemes.

Many such schemes are envisaged, some are in active course of preparation and one or two are so far advanced that a commencement upon the actual work can be expected in the very near future.

The major scheme planned for the supply of water throughout the County is the one which would confer the greatest benefit on the community and it is to be hoped that the general financial and economic state of the Country will not unduly delay the fruition of the comprehensive scheme.

I wish again to take this opportunity to extend my sincere thanks to other members of your staff for their every ready and continued help and co-operation during the year.

I have the honour to remain,

Ladies and Gentlemen,

Your obedient Servant,

W. MILTON JONES,
M.B., Ch.B.

SECTION "A."

Statistics and Social Conditions of the Area.

Area of the District—163,477 Acres.

Registrar General's estimate of Population for the mid-year
1950—10,350.

Population (1931 Census)—11,487.

Number of Inhabited Houses—3,026.

Rateable Value—£54,828.

Sum represented by a Penny Rate—£225

Extracts from Vital Statistics for the Year 1950.

			<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
Live Births (Total 157)	{ Legitimate	... 72	67	139	
	{ Illegitimate	... 7	11	18	

Birth Rate per thousand of the estimated population—15·17.

			<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
Still Births (Total 8)	{ Legitimate	...	4	3	7
	{ Illegitimate	...	—	1	1

Still Birth Rate per thousand of the estimated population—·77.

Deaths. Males—63; Females—68; Total—131.

Death Rate per thousand of the estimated population—12·65.

Number of Women dying in or in consequence of child birth:—

From Sepsis—Nil. From other causes—Nil.

Maternal Mortality Rate per thousand total births—Nil.

Number of Deaths of Infants under 1 year of age:—

				<i>Male.</i>	<i>Female.</i>	<i>Total</i>
Legitimate	...	...	...	3	3	6
Illegitimate	...	...	...	—	1	1

Death Rate of Infants under 1 year of age:—

All Infants per thousand Live Births—44·6.

Legitimate Infants per thousand Live Births—38·2.

Illegitimate Infants per thousand Live Births—6·4.

Deaths from Measles (all ages)—Nil.

Deaths from Whooping Cough (all ages)—Nil.

Deaths of Infants under 4 weeks of age—

				<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
Legitimate	...	...	...	2	1	3
Illegitimate	...	...	...	—	1	1

Deaths from Diarrhoea (under 2 years of age)—Nil.

Deaths from Cancer—

Male—10 ; Female—10 ; Total—20.

Average age at death of those dying from Cancer—65·4.

Deaths from Tuberculosis—

According to the Returns of Deaths received from the Registrar General no deaths from Tuberculosis were registered during the year.

Total deaths of Residents of the area who died in Hospitals and Institutions—24.

Percentage of Total Deaths occurring in Hospitals and Institutions
—18·3.

The following Vital Statistics for England and Wales are given for the purpose of comparison.

Death Rate per thousand of the Civilian Population—11·6

Birth Rate { Live Births per thousand Civilian Population—15·8
Still Births per thousand Civilian Population—0·37

Maternal Mortality Rate—Per Thousand Total Births—0·86.

Still-Birth Rate—Per Thousand of the Estimated Population—
0·37

Death Rate under 1 year of age—

Per thousand of the related live Births—29·8

Maternal Mortality.

As in my report for the year 1949 no deaths were reported as being due to maternal causes and it is to be hoped that this gratifying state of affairs will continue.

Infantile Mortality.

During the year the deaths of seven infants under the age of 1 year were notified.

Of these, three males and three females and one illegitimate female were notified.

Prematurity was the cause of death in the case of three infants—the deaths taking place in one week and under.

Broncho pneumonia and congenital heart disease accounted for the deaths of two infants at three and six months respectively.

Debility from birth and prematurity (one of twins) was the cause of death of another infant at 6 days and the seventh died at 1 month as the result of asphyxia due to inspiration of food.

The following is the Registrar General's detailed list of the various causes of deaths, together with numbers and sex, allotted to the area during the year 1950:—

<i>Disease.</i>		<i>Males.</i>	<i>Females</i>
Acute Poliomyelitis	...	1	1
Malignant Neoplasm (Stomach)	...	2	3
„ „ (Lung Bronchus)	...	1	—
„ „ (Breast)	...	—	1
Other Malignant and Lymphatic Neoplasms		7	6
Leukaemia—Aleukaemia	...	1	—
Vascular Lesions of Nervous Systems	...	5	10
Coronary Disease (Angina)	...	6	3
Other Heart Diseases	...	11	18
Other Circulatory Diseases	...	2	2
Influenza	...	2	2
Pneumonia	...	1	3
Bronchitis	...	1	—
Other Diseases of the Respiratory System	...	2	—
Ulcer of Stomach and Duodenum	...	1	—
Gastritic Enteritis and Diarrhoea	...	1	1
Nephritis and Nephrosis	...	—	1
Hyperplasia of Prostate	...	3	—
Other defined and Ill-defined Diseases	...	8	15
Motor Vehicle Accidents	...	2	1
All other Accidents	...	4	—
Suicide	...	2	1
		—	—
	Totals	63	68

Of these deaths 56 were 70 years and upwards and in this number 30 were over 80 years and six over 90 years.

The following Table summarizes the Vital Statistics of the District for the Years 1931—49.

Year	Per 1,000 Population				Per 1,000 Births (Live and Still),	
	Birth Rate	Death Rate	Death Rate from Tub- erculosis	Death Rate from Cancer	Maternal Mortality Rate	Rate of Deaths under 1 year
1931	18·0	13·6	·68	1·63	9·5	81·0
1932	20·1	14·4	·43	1·88	8·5	51·0
1933	14·1	14·6	·43	2·25	Nil	55·0
1934	15·7	13·8	·53	2·28	5·37	100·0
1935	16·2	12·9	·62	1·4	Nil	41·6
1936	14·1	13·1	·54	1·8	5·7	53·8
1937	13·7	14·6	·63	2·1	6·17	46·6
1938	15·05	12·65	·64	1·38	11·9	49·1
1939	16·4	14·65	·27	1·9	Nil	89·4
1940	11·8	16·7	·46	2·8	Nil	85·1
1941	14·3	15·09	·42	1·04	5·3	61·9
1942	15·3	15·1	·53	2·3	Nil	46·2
1943	17·1	11·9	·09	1·9	Nil	31·6
1944	17·3	14·1	·28	2·0	5·3	44·2
1945	18·52	13·53	·38	2·0	Nil	41·4
1946	15·25	13·1	·38	2·2	Nil	37·5
1947	17·76	13·6	·56	2·4	Nil	32·6
1948	18·02	13·8	·30	2·4	5·3	37·6
1949	17·63	13·0	·29	1·8	Nil	54·6
1950	15·17	12·65	Nil	2·0	Nil	44·6

SECTION "B."

General Provision of Health Services for the Area.

1. (a) One Part Time Medical Officer of Health.
- (b) One Surveyor and Chief Sanitary Inspector.
- (c) One Deputy Chief Sanitary Inspector.
- (d) One Unqualified Assistant.

Note.

The two Officers holding appointments as Sanitary Inspectors also act as Food Inspectors when necessary, and hold the appropriate certificate of the Royal Sanitary Institute.

2. (a) **Laboratory Facilities.** No change.
- (b) **Ambulance Facilities.** No change.
3. (1) **Nursing in the home.** No change.
- (2) **Nursing of Infectious Cases.** No change.
4. **Treatment Centres and Clinics.** No change.
5. **Hospitals—Public and Voluntary.** No change.
6. **Nursing Homes** (including Maternity Homes). No change.

SECTION "C."

Sanitary Circumstances of the Area.

Water Supplies.

The Welsh Board of Health have suggested that this report should include information on the following points:—

(i) **Quality.**

To report upon the quality of the water supplies in the district, it is necessary to distinguish between the public supplies operated by the Council and supplies obtained from privately owned sources.

Generally, the quality of the waters supplied by the Council is good but occasionally samples of untreated water prove unsatisfactory, usually for no apparent reason. The tabulated statement below gives details of the water samples examined and analysed during the year under review.

Public Piped Water Supplies

	Untreated Water.		Treated Water	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Bacteriological	34	17	18	1
Chemical	13	0	2	0

Privately Owned Supplies

	Satisfactory.	Unsatisfactory.
Bacteriological	18	12

It will be seen that one third of the samples of untreated water were found to be unsatisfactory. This high proportion of unsatisfactory samples is explained by the fact that, when one unsatisfactory sample has been found, further samples are taken frequently from the same source until satisfactory results are obtained.

One sample of treated water was found to be insufficiently chlorinated and all samples submitted for chemical analysis proved satisfactory.

The quality of the privately owned supplies is less satisfactory. The large number of domestic wells in use makes it impracticable to prepare a detailed report on the quality of these supplies but experience generally shows that there is a need and a strong demand for public piped supplies throughout the area not already served by water mains.

(ii) Quantity.

In my report for the year 1949 I reported in some detail upon the quantity of water supplies available in the district and my remarks apply equally to the circumstances of 1950 with the exception that during 1950 an extension of watermain was carried out which provides a public piped supply in the village of Llangadfan.

Plumbo-Solvent Action.

I would not expect any of the piped supplies controlled by the Council to have a marked aggressive action on metals. In two cases the water is passed through a contact chamber of limestone chippings to counteract any acidity in the water.

Number of Houses with Public Supply

Particulars of the number of dwelling houses and the number of population supplied from public water mains.

Parish.	Supply laid on to dwellings or curtilage.		Supply by Standpipe.		
	Number of Dwellings	Approx. Population	Number of Dwellings	Approx. Population	
Works controlled by Council.					
Meifod	...	38	157	36	144
Llanerfyl	...	19	76	17	68
Llansantffraid					
Pool	...	52	207	71	344
Pennant	...	27	108	27	126
Llangynog	...	26	104	61	244
Llangadfan	...	6	24	17	68
Llanfair Caereinion	...	117	499	70	280
Llanfihangel	}	5	20	—	—
including Dolanog Village					
Garthbeibio	...	—	—	1	2
Llangyniew	...	—	—	—	—
Hirnant	...	—	—	—	—
Llandysilio	...	—	—	—	—
Llandrinio	...	—	—	—	—
Llanfechain	...	—	—	—	—
Llansantffraid					
Deytheur	...	—	—	—	—
Guilsfield (without)	...	—	—	—	—
Works not controlled by Council.					
Llanfihangel	...	7	28	2	8
Llanwddyn	...	75	300	9	36
Llanrhaiadr	...	19	76	20	80
Carreghofa	...	29	116	—	—

Drainage and Sewerage.

I have in many previous annual reports drawn attention to the need for modern sewerage works for various villages in the district. In my report for the year 1944, I expressed my appreciation of the Council's action in authorising the preparation of sewerage schemes for seven villages. It is disappointing that so little progress has been made during recent years in this connection, and I hope the Council will do everything that is possible to secure some progress.

Closest Accommodation.

There are no substantial changes to report under this heading, and it is unlikely that many conversions will be made until sewerage works are constructed.

Public Cleansing.

There has been little change in arrangements for house refuse collection during the year and the remarks made in my report for 1949 are still applicable. The cost of the scavenging service shows a slight increase over last year to £1,562.

As I have stated in my last two annual reports, additional land for disposal of refuse is urgently needed and I trust that negotiations now proceeding will be successfully concluded at an early date.

Sanitary Inspections.

During the year the Sanitary Officers carried out the following inspections :—

Public Health	...	270
Water Supplies	...	116
Drainage	...	86
Complaints	...	61
Food and Drugs	...	40
Factories	...	27
Infectious Disease	...	16
Milk and Dairies	...	5

As a result of the above inspections the following notices were served, with the result indicated.

Informal.		Statutory.	
Served.	Complied With.	Served.	Complied With.
65	61	4	4

Quantity of Food Condemned.

Meat and Fats.			Other Foods.		
Ham	...	17½lbs.	Salmon	...	3½ozs.
Tinned Meat		7½lbs.	Beans	...	16ozs.
		—	Marmalade	...	6lbs.
Total		25lbs.	Herrings	...	28ozs.
		—	Plums	...	20ozs.
			Peas	...	19ozs.
			Total		11lbs. 6½ozs.

These figures are considerably less than the corresponding figures for last year.

Milk and Dairies Orders.

Under the Milk (Special Designations) (Raw Milk) Regulations 1949, supplementary licences were granted to two Dealers in Tuberculin Tested Milk having premises outside the area of this authority but distributing milk within the area.

Shops and Offices.

No action taken during the year.

Camping Sites.

There are no licensed camping sites in the district.

Smoke Abatement.

No action necessary.

Swimming Baths and Pools.

There are no swimming baths or pools in the district.

Eradication of Bed Bugs.

No action necessary

Housing.

During the year detailed inspection were made as follows:—

Routine Inspections	...	85
Rural Housing Survey	...	519
		<hr/>
Total		604
		<hr/>

These inspections revealed 8 cases of overcrowding.

Action under the Housing Act 1936.

Undertaking under Section 11	...	1
Closing Order under Section 12	...	1
Demolished by owner before official action		1

Rural Housing Survey.

I am glad to report that the Rural Housing Survey advocated by the Ministry of Health in 1944 has been commenced. A complete survey of all the houses in the district will obviously take considerable time if one man only is employed on the work, but by the end of 1950 the survey was substantially complete in three parishes.

The Council will have received interim reports from the Sanitary Inspector upon the progress of the work and of the results so far ascertained, and there is no need for me therefore, to deal at length with the results up to date. It is however, interesting to note the comparatively few cases of overcrowding. On the other hand the number of houses found to be unfit for human habitation and incapable of being made fit at reasonable expense is as high as 17% of all the houses surveyed.

Schools.

There were no school closures during the year as the result of Infectious Diseases.

General Health of school children appears to be very satisfactory and freedom from Diphtheria continues and would certainly be due to the active immunization which has now been given all school children with the exception of a small minority.

General welfare of school children is excellently attended to and the established school canteens are much appreciated.

Conveyance of children to and from school is necessary and beneficial in a district such as this where, in many cases, children are under the necessity of travelling many miles to either the local or the new Central Schools. Of the latter one is nearing completion in Llanfair Caereinion and another is shortly to be commenced in Llanfyllin.

When finished these latter schools will cater for the educational and physical needs of older children of practically the whole of the Council's area.

Section "F."

Prevalence of, and control over, Infectious Diseases.

During the year under review 36 cases of infectious diseases were notified—a slight increase upon the numbers reported (21) during the previous year.

These figures do not include cases of Tuberculosis notified during the year and these are dealt with elsewhere in this report.

During the months from July to November eight cases of Acute Anterior Poliomyelitis were notified. Three were males and five were females and the ages ranged from 6 years to 50 years.

Four cases occurred in the extreme western district of the Council's area but no point or points of contact could be found.

Two persons who contracted the disease in this district were related but lived some considerable distance from each other and, while there was no evidence of recent contact between the patients, there probably was indirect contact through other relatives.

The other four cases were widely scattered and separated with no possible point of contact.

Under these conditions and in a district so thinly populated as this is and where, with one exception, all the patients lived "in the country" it is virtually impossible to locate the source or sources of the disease.

The infection may, in some way, have been imported and there is evidence, in three of the cases, to indicate that, only a short time before they became ill with the disease, these three young people were resident in populous areas outside the Council's district.

Two deaths were notified as being due to this disease and both took place in Hospitals into which the patients had been transferred.

One of these patients appears to have been taken ill sometime after she left this district to take up employment and her death was allocated to this district.

Of the total diseases notified 20 were males and 16 were females and of this number 5 cases of Acute Anterior Poliomyelitis were admitted into Hospital for treatment.

There appear to have been notified 4 deaths as the result of Pneumonia 1 being male and 3 being females.

No cases of Diphtheria were notified and this most happy state of affairs can, without doubt, be ascribed to the fact that immunization against this disease is still being carried out vigorously and the continued help and co-operation of parents and guardians of children in this connection is again stressed.

Facilities for the immunization of children are available through the school medical authorities and medical practitioners are very ready to co-operate in the campaign to keep this disease in check by active immunization.

The use Vaccination against Small Pox as a preventive and protective measure is gradually falling into disuse and a state of affairs seems likely to arise where only a minority of the population will be immunized against this disease. Under such conditions local outbreaks of Smallpox might spread alarmingly defying all measures of control and segregation.

The obvious remedy is, of course, to resort once again to the now largely neglected protection by vaccination.

No immunizations against Scarlet Fever were carried out during the year nor were any vaccinations or re-vaccinations performed during this period under Public Health (Small Pox) Regulations.

No cases of Scabies were brought to notice during the year.

Four Sanitary Inspectors carry out all requisite disinfection of premises when necessary and give instruction, which is of much benefit, in the matter of hygiene, segregation and the prevention of the spread of infectious diseases.

These instructions are of a special importance in areas where milk production is practised on such an extensive scale.

Notification of Infectious Diseases appears to have been satisfactory during the year.

The following Tables are an analysis of Notifiable Infectious Diseases (Tuberculosis excepted), of which information was received during the year 1950.

Disease.	Number of Cases Notified.		Admissions into Hospital.			Deaths.
	M	F				
Erysipelas	2	1	...	—	...	—
Pneumonia ..	3	6	...	—	...	4
Scarlet Fever	4	1	...	—	...	—
Measles ...	6	1	...	—	...	—
Acute Anterior Poliomyelitis	3	5	...	5	...	2
Whooping Cough ...	2	2	...	—	...	—
TOTAL	20	16	...	5	...	6

Age Incidence of cases of Infectious Diseases Notified.

Disease.	Under 1 year	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65+	Total.
Erysipelas	—	—	—	—	—	—	—	—	—	—	1	2	3
Pneumonia	1	—	—	—	2	2	1	—	1	—	2	—	9
Scarlet Fever	—	—	—	1	2	2	—	—	—	—	—	—	5
Acute Anterior Poliomyelitis	—	—	—	—	—	1	1	2	1	2	1	—	8
Whooping Cough	—	—	—	—	1	3	—	—	—	—	—	—	4
Measles ...	—	1	—	—	2	3	1	—	—	—	—	—	7
Total ...	1	1	—	1	7	11	3	2	2	2	4	2	36

Tuberculosis.

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under section 2 of the Public Health Act, 1925.

During the year seven (7) new cases of Tuberculosis were notified and of these two were Males and Five were Females.

A similar number of cases (two males and five females) were notified during the preceeding year with a difference that, of the cases notified during the year under review, Four (4) were cases of Pulmonary Tuberculosis (all female) and Three were cases of Non- Pulmonary Tuberculosis (Two male and One Female).

The average age of these cases at the time of notification was 22.6 years and the ages varied from 10 years to 43 years.

It is gratifying to record that no deaths due to Tuberculosis in its various forms were notified during the year.

Notification of cases of Tuberculosis in your area appears to be satisfactory.

Classification of New Cases of Tuberculosis (all forms) and Deaths from this disease according to Age, Sex and type.

Age Periods. <i>Years.</i>	—NEW CASES—				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
0— 1 ...	—	—	...	—	—	...	—	—
1— 5 ...	—	—	...	—	—	...	—	—
5—10 ...	—	—	...	—	—	...	—	—
10—15 ...	—	—	...	1	1	...	—	—
15—20 ...	—	1	...	1	—	...	—	—
20—25 ...	—	—	...	—	—	...	—	—
25—35 ...	—	2	...	—	—	...	—	—
35—45 ...	—	1	...	—	—	...	—	—
45—65 ...	—	—	...	—	—	...	—	—
65+ ...	—	—	...	—	—	...	—	—
Totals ...	—	4	2	1	—	—	—	—

While no chest clinics are held within your area these are available in Machynlleth, Newtown and Welshpool and, further afield, in Shrewsbury and Wrexham.

The services of the Chest Physician and his staff for the purpose of domiciliary consultations are always available and are much appreciated.

In view of the continued shortage of beds in Hospitals and institutions a majority of patients receive attention and instruction and are supervised at home.

Generally speaking the Public are now much more eager and ready to co-operate where investigations for Tuberculosis are necessary.

Your Sanitary Inspectors continue to give much useful help when disinfection of premises is indicated and their guidance in matters pertaining to the safeguarding of health continues to be appreciated.

Laboratory Work and Facilities.

There are no changes to report in this Section, as previously noted there are no Laboratories in the Council's area.

Laboratories however are available in the Hospitals in Aberystwyth, Swansea, Shrewsbury, Wrexham and elsewhere and free use is made of these facilities and the staffs are always ready to give skilled and expert advice upon material submitted for their investigation.

In view of continuing absence of Diphtheria there is practically no demand for anti-diphtheritic Serum which you supply upon request, to those Medical Practitioners in your area who require to administer it.

Prevention of Blindness.

No action taken.

No change in existing organizations, Hospitals or Methods of supervision.

Hearing Aid Clinic.

An active clinic is situated in Wrexham for the purpose of investigation of Deaf Persons with a view to supplying much appreciated Hearing Aids.

Cancer.

Twenty deaths due to Cancer were notified during the year. Ten being male and ten were females.

The average age at death was 65.4 years and ages varied between 54 years and 80 years.

